|                                                                                                                                                                                                                                                                                                                                                                                                      |                                          |                                                         |                 | חמו                           | Application or Docket Number |                  |         |                     |                        |             |                     |                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------|-----------------|-------------------------------|------------------------------|------------------|---------|---------------------|------------------------|-------------|---------------------|------------------------|
|                                                                                                                                                                                                                                                                                                                                                                                                      | PATENTA                                  | APPLICATIO<br>Effect                                    | ive Janua       | 15772-1003                    |                              |                  |         |                     |                        |             |                     |                        |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                                                                                                                                                                                                                                                                                                                                                       |                                          |                                                         |                 |                               |                              |                  |         | SMALL E             | МПТҮ                   | OR          | OTHER               |                        |
| TOTAL CLAIMS                                                                                                                                                                                                                                                                                                                                                                                         |                                          |                                                         | 26              |                               |                              |                  |         | RATE                | FEE                    |             | RATE                | FEE                    |
| FOR                                                                                                                                                                                                                                                                                                                                                                                                  |                                          |                                                         | NUMBER FILED    |                               | NÚMBER EXTRA                 |                  |         | BASIC FEE           | 375.00                 | OR          | PASIC FEE           | 750.00                 |
| TOTAL CHARGEABLE CLAIMS                                                                                                                                                                                                                                                                                                                                                                              |                                          |                                                         | ∑la minus 20∞   |                               | . 6                          |                  | ŀ       | X\$ 9=              |                        | OR          | X\$18=              | lo X                   |
| INDEPENDENT CLAIMS                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                         | 2 minus 3 =     |                               | <b>4</b>                     |                  |         | X42=                |                        | OR          | X84=                |                        |
| MULTIPLE DEPENDENT CLAIM P                                                                                                                                                                                                                                                                                                                                                                           |                                          |                                                         | RESENT          |                               |                              |                  |         | +140=               |                        | ОЯ          | +280≈               |                        |
| + if                                                                                                                                                                                                                                                                                                                                                                                                 | the difference                           | in column 1 is                                          | less than ze    | zero, enter "0" in column 2   |                              |                  | İ       | TOTAL               |                        | OR          | TOTAL               | 9.58                   |
| 4                                                                                                                                                                                                                                                                                                                                                                                                    | 4/29/05 (Column 1) (Column 2) (Column 3) |                                                         |                 |                               |                              |                  |         | SMALL               |                        | -<br><br>OR | SMALL               |                        |
| AMENDMENT A                                                                                                                                                                                                                                                                                                                                                                                          | 127105                                   | (Column 1) CLAIMS REMAINING AFTER AMENDMENT             |                 | HIGH<br>NUM<br>PREVIO         | EST<br>BER<br>OUSLY          | PRESENT<br>EXTRA |         | RATE                | ADDI-<br>TIONAL<br>FEE |             | RATE                | ADDI-<br>TIONAL<br>FEE |
| OSAE                                                                                                                                                                                                                                                                                                                                                                                                 | Total                                    | •                                                       | Minus           | -                             |                              | G                | 1       | X\$ 9=              |                        | OR          | X\$18=              |                        |
| ME                                                                                                                                                                                                                                                                                                                                                                                                   | Independent                              | $\cdot$                                                 | W mg/           | 4                             |                              | -                |         | X42=                |                        | OR          | X840                |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                      | PIRST PRESE                              | NTATION OF M                                            | ULTIPLE DE      | PENDER                        | FELAIM                       | L_               | 1       | +140=               |                        | OR          | +280=               |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                      |                                          |                                                         |                 |                               |                              |                  |         |                     |                        | OR          | TOTAL<br>ADDIT, PEE |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                      | (Column 1) (Column 2) (Column 3)         |                                                         |                 |                               |                              |                  |         |                     | <b></b>                | 3           | ADDII. FEE          |                        |
| ENT B                                                                                                                                                                                                                                                                                                                                                                                                |                                          | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT               |                 | PREVIO                        | EST<br>BER<br>CUSLY          | PRESENT<br>EXTRA |         | RATE                | ADDI-<br>TIONAL<br>FEE |             | RATE                | ADDI-<br>TIONAL<br>FEE |
| MO                                                                                                                                                                                                                                                                                                                                                                                                   | Total ·                                  | .26                                                     | Minus           | •2                            | 6                            | • _              |         | X\$ 9=              |                        | OR          | X\$18=              |                        |
| amendment                                                                                                                                                                                                                                                                                                                                                                                            | Independent                              | • 2<br>NTATION OF M                                     | Minus           | ***                           | <u>3</u>                     | •                | $\  \ $ | X42=                |                        | ОЯ          | X84= '              |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                      | PINST PRESE                              | RIAHON OF M                                             | ULTIPLE DE      | BIOEIV                        | ·                            |                  | ا د     | +140=               |                        | OR          | +280=               |                        |
| 6                                                                                                                                                                                                                                                                                                                                                                                                    | 127/106                                  | (O-1 1)                                                 | ROF             | (Colu                         | M                            | (Column 3)       |         | TOTAL<br>ADDIT. FEE |                        | OR          | TOTAL<br>ADOIT, FEE |                        |
| 10                                                                                                                                                                                                                                                                                                                                                                                                   | 20100                                    | (Column 1)<br>Claims<br>Remaining<br>After<br>Amendment | 1102            | HIGH<br>HUM<br>PREVIO<br>PAID | EST<br>BER<br>CUSLY          | PRESENT<br>EXTRA |         | RATE                | ADDI-<br>TIONAL<br>FEE |             | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMEN                                                                                                                                                                                                                                                                                                                                                                                             | Total                                    | ・スス                                                     | Minus           | -2                            | 6_                           | <i>- U</i>       |         | X\$ 9=              |                        | OR          | X\$18=              |                        |
| PAE                                                                                                                                                                                                                                                                                                                                                                                                  | Independent                              | ・ ユ                                                     | Minus           |                               | 3                            | -2               | $\  \ $ | X42=                |                        | OR          | X84=                |                        |
| لنا                                                                                                                                                                                                                                                                                                                                                                                                  | FIRST PRESE                              | NTATION OF M                                            | ULTIPLE DE      | PENDEN                        | CLAIM                        |                  | ا ا     | +140=               |                        | OR          | +280=               |                        |
| "If the entry in column 1 is less than the entry in column 2, write "O" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1. |                                          |                                                         |                 |                               |                              |                  |         |                     |                        |             |                     |                        |
|                                                                                                                                                                                                                                                                                                                                                                                                      | The Highest Nur                          | ber Proviously Pa                                       | id For (Rotal o | r bulspend                    | end) is the                  | nighest rumb     | er tol  | wa eu gus sb        | proprieto po           | ir no co    | ayana 1.            |                        |